<u>AUTHORIZATION I</u>	REQUEST FORM	
Amendment 🕹 New  South Carolina Department of Health	Landfill Recycle and Environmental Control Landfarm	
A D A Mareau of Solid and Hazardous	Waste (803) 734-5200 Other	লক্ষ্মিক দেশু চাল (১৮১২ চিচ্চাল
ABPA (Authorization Number: ST = 00	002 = 6544 To be entered	ENSI: of PA
Generator Information:		A CONTRACTOR OF THE SECOND SEC
Generator ID #	USEPA REGION I	e same programme in the basis of the basis o
Address WoodBRIDGE AVE City ED	State Zip	Code   08317
Official Contact MARK PANE Title OSC	Telephone  201-906-6813	The state of the s
Treatment, Storage, or Disposal Facility Information:		SC County
Facility EPA ID # SCDO 44442333 Name	ThermalKEM Inc.	r In-State Generator Only)
, wanto		
NA Line # (This line # will always represent this specific waste s	stream )	
ായ പ്രത്യാഗ്രസ്ത്ര വരുന്നു. പ്രത്യാഗ്രസ്ത്ര പ്രത്യാഗ്രസ്ത്ര വരുന്നു. വരുന്നു വരുന്നു വരുന്നു. വരുന്നു വരുന്നു പ്രത്യാഗ്രസ്ത്രം പ്രത്യാഗ്രസ്ത്രം പ്രത്യാഗ്രസ്ത്രം പ്രത്യാഗ്രസ്ത്രം പ്രത്യാഗ്രസ്ത്രം വരുന്നു. വരുന്നു വരുന്നു	Mary American Artifology and American and American	
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Description of Hazardous Waste		
	Process Producing Waste:	
DOO! DOOS DOOS 6666 W1.17 VARIES EZ	discorded lab chemicals	
The state of the s		
EPA/DHEC Waste Codes DOT Hazard C	lass	
Enter Quarter for One-Time Disposal: 4 / 88 Qtr/yr.	Handling Math. d. 177	<u> </u>
If Multiple Shipments Enter Frequency Here: times/yr.	Handling Method:	
	Volume: (lbs/yr. only)	100
Physical State of Waste @ 70°F  1. Solid 2. Solid 3. N/A*  1. N/A*  ** SEE ATTRICHED		<b>°F</b>
For DHEC use only:	, de mandre de la grade de la companya de la compa	the district of
Date Received:Note:		
DHEC 1969 REV (8/86)	e de la companya del companya de la companya del companya de la co	

## **AUTHORIZATION REQUEST FORM (con't)**

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scosity @ 70°F: 🗐	Lov	٧	L Medium	Ligh High		L <b>ayering: [</b> 米] Non	ام			
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## AUTHORIZATION REQUEST FORM (con't)

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	cation: based on the inforceon, and do here sal in the manner	cation: based on the information presentereon, and do hereby inform the general in the manner designated, and in the manner designated.  UNNA ROMEO	cation: based on the information presented in this document, and do hereby inform the generator listed hereby in the manner designated, and in compliance ture:    Compa A Remoderation   Compliance   C	dame: MARK PANE  Title:  cation:  based on the information presented in this document this faciliateon, and do hereby inform the generator listed hereon of acceptable in the manner designated, and in compliance with the TSD Formation and Romeo  Date Section:  UNNA ROMEO	Date Submitted:    MARK LANE   Title: ON SENE	cation: based on the information presented in this document this facility is permitted to accept the waste serion, and do hereby inform the generator listed hereon of acceptance of the waste for treatment, storal in the manner designated, and in compliance with the TSD Facility's standard terms and conditure:    Date Submitted: 10/12/8

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## ThermalKEM CyanoKEM



454 S. Anderson Rd., BTC 532 Rock Hill, SC 29730 803/329-9690

Date: October 27, 1988

Mark Pane
USEPA Region II
Woodbridge Avenue
Edison, NJ 08317

Re: ST - 00002-6544

Generator: USEPA Region II

Broker: ENSI of PA

Approved for receipt at ThermalKEM, Inc.

after October 12, 1988\*
\*15 days waived by SCDHEC

The South Carolina Department or Health and Environmental Control requires that TSD facilities return to the generator and/or broker a signed copy of the Authorization Request Form (ARF) for all waste streams accepted for treatment, storage, or disposal. Attached to this letter is a copy of the ARF for your records.

ThermalKEM, Inc.

**Attachment**